

NEW MEXICO OIL CONSERVATION COM. SION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

Operator Enserch Exploration, Inc. EP OPERATING CO. (eff. 6/12/85)	
Address P. O. Box 4815, Midland, Texas 79704	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

25 80 ac

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lambirth	Well No. 12	Pool Name, Including Formation South Peterson Penn. <i>Assoc</i>	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>K</u> ; <u>2310</u> Feet From The <u>South</u> Line and <u>1854</u> Feet From The <u>West</u> Line of Section <u>31</u> Township <u>5S</u> Range <u>33E</u> , NMPM, <u>Roosevelt</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Company - Trucks	4001 Penbrook, Odessa, Texas 79762					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Citios Service Company <i>Warren, Tex</i>	Bluitt Plant, Milnesand, New Mexico 88125					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 31	Twp. 5S	Rge. 33E	Is gas actually connected? <i>No</i>	When <i>4-4-86</i>

If this production is commingled with that from any other lease or pool, give commingling order number: PC 573

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
		X	X					
Date Spudded 2/16/85	Date Compl. Ready to Prod. 4/13/85		Total Depth 7750'		P.B.T.D. 7670'			
Elevations (DF, RKB, RT, GR, etc.) 4410/7' GR	Name of Producing Formation Pennsylvanian		Top Oil/Gas Pay 7611'		Tubing Depth 7546'			
Perforations 7611'-65'					Depth Casing Shoe 7750'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		370'		375 sacks			
12-1/4"	9-5/8"		2005'		875 sacks			
8-3/4"	5-1/2"		7750'		565 sacks			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 3/30/85	Date of Test 4/13/85	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hours	Tubing Pressure 85#	Casing Pressure Packer	Choke Size 24/64"
Actual Prod. During Test	Oil - Bbls. 3	Water - Bbls. 58	Gas - MCF 170

GAS WELL

Actual Prod. Test-MCF/D 170	Length of Test 24 hours	Bbls. Condensate/MMCF 17.6	Gravity of Condensate 42.4
Testing Method (pitot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1540	Casing Pressure (Shut-in) 0	Choke Size 24/64"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

H. F. Burnett
(Signature) H. F. Burnett

Production Superintendent

April 22, 1985

(Title)

(Date)

OIL CONSERVATION COMMISSION

APPROVED **APR 28 1986**, 19

BY **ORIGINAL SIGNED BY JERRY SEXTON**

DISTRICT I SUPERVISOR

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

MAY 1 1985

ADAMS OFFICE

MAY 1 1985

APR 24 1985

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